## PART B - FEE(S) TRANSMITTAL

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appropriate. All nurther correspondence including the Patent, advance orders and no indicated unless corrected below or directed otherwise in Block 1, by (a) specifying maintenance fee notifications.	tification of maintenance fees will be mailed to the current correspondence address a a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for
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(Signature) (Date)

į	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	10/505,406	03/28/2005	Satoshi Okada	0717-0525PUS1	8973
	TITLE OF INVENTION: CONTROLLING THE CHA	CHARACTER DISPLAT	Y APPARATUS AND CHARACTER DISPLAY METH HOD AND RECORDING MEDIUM RECORDING THE CON	OD, CONTROL PROGR TROLPROGRAM	AM FOR

	APPLN. 1 IPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional	NO	\$1510	\$300	\$0	\$1810	01/08/2009
	EXAMINER ART UNIT AMIN, JWALANT B 2628		CLASS-SUBCLASS				
			345-589000	'			
•	<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence.</li> </ol>			For printing on the patent front page, list     (1) the names of up to 3 registered patent attorneys     or agents OR alternatively.		eys 1 Birch,	Stewart,

Address form PTO/SB/122) attached , Kolasch & Birch, LLP (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNER (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Sharp Kabushiki Kaisha

Osaka, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 💆 Corporation or other private group entity 🚨 Government

4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) KIssue Fee A check is enclosed.

Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.

KAdvance Order - # of Copies \_ six (6) The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-244 Senclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Traderinark Office.

November 20, 2008 Authorized Signature \_ Date Typed or printed name \_\_ Michael R. Cammarata

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